

Cover Sheet for:

Site Plan 8-98001A

Project Application



Site Plan Review

For M-NCPPC Staff Use Only

Date Application & Fee Received 9/7/00 by K. Hall
SPR Fee (Attach Fee Worksheet) 8/1/00.00
Date Application Complete _____ by _____
SPR Deadline _____

Site Plan File Number 8 - 98001A
Final FCP Number 1-95042
NRI/FSD Number 1-95042
DRC Meeting Date _____
MCPB Hearing Date _____

Proposed Site Plan Name (if amendment, use original site plan name) Clarksburg Town Center

Preliminary Plan Name Clarksburg Town Center File Number 1 - 95042

Pre-Application Submission Name, if any _____ File Number 7 - _____

Project Plan Name, if applicable _____ File Number 9 - _____

If previously approved Site Plan, File Number 8 - 98001

Planning Board Opinion Date ____ / ____ / ____

Status: _____ Void

_____ Extended to (date) ____ / ____ / ____

_____ Withdrawn

☒ Amended by this application

If no prior Preliminary Plan, check one of the following: ☐ Preliminary Plan currently being reviewed

☐ Lot already recorded

If Record Plat recorded, M-NCPPC Record Plat Number _____

Is this a loophole property? ☐ Yes ☒ No (Refer to MCC Bill #1-88, concerning a timely APF review prior to issuance of a Building Permit.)

Other previous or pending application information:

If schematic Development Plan as part of Local Map Amendment (59H2.4A)
Case Number G - _____ date granted ____ / ____ / ____

If approved Development Plan (59-D-1)
Case Number G - _____ date granted ____ / ____ / ____

If approved Project Plan (59-D-2)
File Number 9 - _____ date approved ____ / ____ / ____

If Special Exception/Variance
Case Number S - _____ or A - _____ date adopted ____ / ____ / ____

Tax Account Number 1. 16020008787 2. _____ 3. _____ 4. _____

Tax Map Page Number EW 233 NW 13

Location:

(complete either A or B)

A. On _____, _____ feet _____ of _____
Street Name Distance N, E, S, W, etc. Street Name

B. SE quadrant, intersection of Stringtown Road and Piedmont Road
N, E, S, W, etc. Street Name Street Name

(complete either C or D)

C. On _____, _____ feet _____ of _____
Street Name N, E, S, W, etc. Street Name

D. _____ quadrant, intersection of _____ and _____
N, E, S, W, etc. Street Name Street Name

Planning Area Number PA 13

Site Plan Review Application

Site Area:

Gross area of Site Plan	22.14	ac.	964,637	s.f.
Area dedicated to Public Use	6.07	ac.	264,366	s.f.
Total net area of Site Plan	16.07	ac.	700,271	s.f.
Area by Zone: Zone 1: RMX-2	16.07	ac.	700,271	s.f.
Zone 2:		ac.		s.f.
Zone 3:		ac.		s.f.

Incorporated Municipality or Special Taxing District, if applicable _____

Is site in the Locational Atlas and Index of Historic Sites? ☐ Yes ☒ No

Is site on the Master Plan for Historic Preservation? ☐ Yes ☒ No

Development Information:

Residential	No. of Units	Non-Residential	Gross Floor Area
One-family detached	36	Commercial Office	
One-family semi-detached		Commercial Retail	
One-family attached		Industrial	
Townhouses	79	Other	
Duplex		Other	
Triplex		Other	
Multi-family		Other	
Total proposed	115	Other	
Included MPDUs	12	Other	
Included TDRs	0	Total Proposed	
Existing dwelling units to remain	0	Existing to remain	

Method of Development: ☒ Standard ☐ Cluster ☐ MPDU ☐ TDR ☐ _____
Other Optional Method

Requested Waivers: (if any)

59-E (Parking Ordinance) _____

 Other _____

Site Plan Review Application

Application Information:

1. Applicant (Owner or Contract Purchaser)

Name Terrabrook Contact Person Jim Richmond
 Street Address 42935 Waxpool Road
 City Ashburn State VA Zip Code 20148
 Phone Number (703) 858-7308 Fax Number (703) 858-7380

2. Developer (if different from Applicant above)

Name _____ Contact Person _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Phone Number _____ Fax Number _____

3. Engineer

Name Charles P. Johnson and Associates, Inc. Contact Person Les Powell
 Street Address 1751 Elton Road
 City Silver Spring State MD Zip Code 20903
 Phone Number (301) 434-7000 Fax Number (301) 434-9394

4. Architect

Name _____ Contact Person _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Phone Number _____ Fax Number _____

5. Landscape Architect

Name _____ Contact Person _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Phone Number _____ Fax Number _____

6. Attorney

Name _____ Contact Person _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Phone Number _____ Fax Number _____

Signature of Applicant (Owner or Contract Purchaser)

Signature Tracy Graves
 Name (Type or Print) TRACY GRAVES

Date 9/6/00

Site Plan Review

Checklist

- i. A grading plan
- j. The location of all sewer, water, gas, electric, telephone, and storm drainage lines; all easements and rights-of-way, existing or proposed; all off-site utility connections and all utility structures, if separate drawing
- k. Data table showing proposed development data compared to requirements of zone, master plans, development plan, preliminary plan or supplementary plan, as applicable
- l. TDR calculations, if applicable
10. A Landscaping Plan, so titled, showing all man-made features and the location, height or caliper, and species of all plant material to be preserved, transplanted, or planted; including R.O.W. plantings and off-site plantings pursuant to Final Forest Conservation Plan
11. An exterior Lighting Plan, so titled, including all parking areas, driveways and pedestrian ways, and including the height, number, and type of light fixtures, and a diagram of light distribution characteristics ..
12. A development program stating the sequence in which all structures, utilities, open spaces, vehicular and pedestrian circulation systems, landscaping, forest conservation and recreational facilities are to be developed; when any land is to be dedicated for public use; and when the applicant will notify the Planning Board to request inspection for compliance with the approved site plan
13. List of adjacent and confronting property owners, presented in conformity with the Planning Board's noticing requirements
14. Site Plan Enforcement Agreement and HOA documents, if applicable ...
15. Grading feasibility study of MCPS sites to be dedicated, and certification of environmental acceptability
16. Final Forest Conservation Plan and Worksheet, including tree survey of 6" diameter and greater trees within 25' either side of the limit of disturbance
17. Approved Stormwater Management Concept Plan, so titled, or 1" = 30' (or approved plan for off-site SWM), including MCDPS approval letter ..
18. Proposed Storm Drainage Area, so titled, at 1" = 30', and computations, if separate drawing
19. Proposed Sediment Control Plan, so titled, at 1" = 30', including tree protection measures, if separate drawing
20. Architectural schematic plans and elevations for buildings and structured parking, identifying height, general description, phasing and signage, as required by staff

No. Copies	Engineer/Surveyor	M-NCPPC Staff
12		
12		
12		
1		
1		
2		
3		
3		
3		
3		
1		

Site Plan Review

Checklist

POST-APPROVAL SUBMISSION

The following items will not be submitted until after the site plan is approved, but should be submitted to the Development Review Division prior to the submission of the record plat application(s) in order to assure timely recordation of the final record plat.

1. Site development and grading plan (signed)
2. Landscape and lighting plan (signed)
3. Architectural plans, including FAR calculations, if required
4. Structure parking plans, if required
5. Phasing plan, where required
6. Site Plan Enforcement Agreement (original signature)
7. Development Plan
8. Homeowner association documents (final draft)
9. Copy of engineer's certificate for design of private streets, if required
10. Other agreements (original signature)

No. Copies	Engineer/Surveyor	M-NCPPC Staff
3		
3		
1		
1		
1		
1		
2		
1		
1		
2		

The engineer or surveyor hereby certifies that all required information for the submission of a site plan has been included with this application.

Engineer/Surveyor Signature

Signature

Name (Type or Print)

Date

9/6/00



Montgomery County Department of Park & Planning
Development Review Division

Effective 7/1/99

Maryland-National Capital Park & Planning Commission ■ 8787 Georgia Avenue, Silver Spring, Maryland 20910-3760 ■ (301) 495-4595, Fax (301) 495-1306

APPLICATION

Fee Schedule/Worksheet

To Be Completed By Applicant

Application Number: _____

Applicant: _____

Proposed Project Name: _____

Pre-Application Submission:	Staff review only	\$440	= \$	_____
	Staff and Planning Board Review	\$660	= \$	_____

NRI/FSD Natural Resources Inventory/Forest Stand Delineation:				
	Single-Family Residential	\$100	= \$	_____
	Multi-Family, Commercial, Industrial, Institutional, Religious	\$200	= \$	_____

Forest Conservation Plan:				
	Single-Family Residential	\$50	plus \$15/lot x _____ lots	= \$ _____
	Multi-Family, Commercial, Industrial, Institutional, Religious	\$100	plus \$30/acre x _____ acres	= \$ _____

Preliminary Plan of Subdivision:	<u>Residential</u>			
	1 - 9 units		\$1,100	= \$ _____
	10 - 49 units		\$2,200	= \$ _____
	50 or more	\$3,300	plus \$22 x _____ (# of units) > 50 units	= \$ _____
	<u>Commercial/Industrial</u>			
	up to 9,999 s.f.		\$1,650	= \$ _____
	10,000 to 24,999 s.f.		\$2,200	= \$ _____
	25,000 s.f. or more	\$3,300	plus \$0.02 x _____ s.f. > 25,000 s.f.	= \$ _____
	<u>Institutional/Religious</u>		\$1,100	= \$ _____
	Amendments to Approved Plans		\$1,100	= \$ _____
	Extensions of Approved Plans		\$660	= \$ _____
	Variation from Subdivision Regulations		\$660	= \$ _____

Project Plan:	<u>Residential</u> (D.U.s)	\$1,870	plus \$18 x _____ (# of dwelling units)	= \$ _____
	<u>Commercial</u> (GFA)	\$1,870	plus \$0.015 x _____ s.f.	= \$ _____
	Amendments		\$1,100	= \$ _____
	Extensions		\$660	= \$ _____
	Sign deposit: \$70.00 per sign (sign refund: \$60.00)			

Site Plan:	<u>Residential</u>			
	1 - 9 units		\$2,200	= \$ _____
	10 or more units	\$3,300	plus \$22 x _____ (# of units) > 10 units	= \$ _____
	<u>Commercial/Industrial</u>			
	up to 9,999 s.f.		\$2,200	= \$ _____
	10,000 s.f. or more	\$3,300	plus \$0.02 x _____ s.f. > 10,000 s.f.	= \$ _____
	<u>Institutional/Religious</u>		\$2,200	= \$ _____
	Amendments to Approved Plans		\$1,100	= \$ 1,100
	Extensions of Approved Plans		\$660	= \$ _____

Record Plat:	\$687 x _____ (# of plats)	= \$ _____
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Please make checks payable to: M-NCPPC

Date Received: _____	Received By: _____	TOTAL: = \$ 1,100
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